



The Delaware Health Care Commission (DHCC) Meeting

September 3, 2020

9:00 a.m. to 11:00 a.m.

Meeting Attendance and Minutes

Commission Members Present: Dr. Nancy Fan (Chair), Theodore W. Becker (Mayor of Lewes), Secretary Rick Geisenberger (DOF), Richard Heffron, Dr. Jan Lee (DHIN), Nick Moriello (Highmark), Trinidad Navarro (DOI), and Secretary Molly Magarik, Melissa Jones

Meeting Facilitator: Dr. Nancy Fan (Chair)

Commission Members Not Present: Dr. Robert Dunleavy (DSCYF)

Health Care Commission Staff Marques Johnson (Administrative Specialist III), Eschalla Clarke (Social Services Sr. Administrator), Latoya Wright (Manager of Statistics and Research), and Ayanna Harrison (Public Health Administrator I)

CALL TO ORDER

Dr. Fan called the meeting to order at approximately 9:02 a.m. via Webex video and phone conference. The meeting started with an attendance roll call to check if the commissioners were all on the line. All commissioners were present except for Dr. Robert Dunleavy. Dr. Fan asked public attendees to virtually sign-in by placing their name and affiliation in the chat box or by sending their name and contact information to the DHCC Resource Account (dhcc@delaware.gov).

Approval of July 9, 2020 Meeting Minutes

Dr. Fan asked the commissioners to review the July 9, 2020, meeting minutes. There were no comments. Mayor Ted Becker motioned to approve the minutes and Secretary Molly Magarik seconded the motion. All commissioners present approved the minutes.

BOARD BUSINESS

DHCC Workforce Planning

Dr. Fan began the workforce planning discussion by reminding the members that this topic had been covered during the June and July calls. The past discussion involved thinking about how to move forward in a comprehensive and planned strategy to approach our workforce planning and development. She stressed the importance of moving within a unified focus to address needs of the state. DHCC reached out

to Secretary Geisenberger and Nick Moriello to obtain their insight on how to move forward with this initiative and discuss establishing a subcommittee or taskforce under DHCC. Several meetings have taken place since the last DHCC meeting. Discussions included separating the goals between short-term and long-term. Short-term goals that could be addressed within the next three to six months. Plans would include researching and identifying strategies to appropriate for CARES Fund in order to optimize funding. One of the long-term goals identified was the formation of a subcommittee that included a diverse group (public and private mix).

Dr. Fan continued the discussion by adding that historically the DHCC workforce initiatives have focused on clinicians and providers. For example, the Student Loan Repayment program (SLRP) and DIDER and DIMER. Part of the subcommittee/taskforce responsibilities would include addressing the gaps in the health care delivery system in order to improve outcomes. She invited Nick Moriello and Secretary Geisenberger to share their thoughts.

Nick Moriello began by stating that he considered this is more of a call to action rather than an update. He addressed the commissioners and members of the public and encouraged them to consider participating. He continued by stating all ideas and perspectives are needed to move the initiative forward. He reiterated Dr. Fan's statement about the need to identify short-term goals to leverage CARES ACT funding. He also stated that one of the long-term ideas for the DHCC would be to commission a study to analyze our population and workforce needs across a five, ten- or fifteen-year timespan. He concluded by once again encouraged members and public attendees to consider participating in the initiative.

Secretary Geisenberger added that the scope of the work is broad. Leveraging the CARES ACT funding should begin with researching possible areas of interest to the commission (i.e., testing, home health aides or nursing homes). He stressed the importance of making sure the state has adequate providers over time to serve the population. He echoed Mr. Moriello's statement by mentioned the workgroup or subcommittee will need a range of involvement to ensure the state has the right workforce. He added that it was also important to consider positions outside of traditional clinicians. He mentioned positions like Health Care Administrators, Data Scientist, Paramedics, and CNAs should be considered. He concluded by stating that health care is a large part of our economy and is second only after financial services.

Dr Fan thanked Secretary Geisenberger and Mr. Moriello. She asked if members approved of plans to move forward with the formulation of a long-range workforce planning committee. She added that, if approved, short-term planning would begin within the next six months.

Mr. Rich Heffron made phones call while working with the Chamber of Commerce. He likes the idea that HCC's role should be to determine where we need to be in five and ten years, as opposed to directing how and who should be trained. He agreed that collecting data will be helpful. He pointed out that several entities are doing similar work in silos. Mr. Heffron added that in speaking with people he has found that community health care workers are in need. Dr. Fan agreed and summarized Mr. Heffron's thoughts by stating that the role of the DHCC, outside of policy forming should be in research, facilitating, collaborating and ensuring the networks are working with each other so we have an efficient process and we are meeting the goals for the next five to ten years.

Dr. Lee emphasized the importance of connecting with other organizations doing similar work to ensure there is no duplications of efforts.

Secretary Geisenberger shared that DHCC should focus some efforts on data collection. Currently, problems are identified, and short-term solutions are created to fill in the gaps, however, if DHCC had the

right data, we could successfully predict possible future issues. Ted Becker agreed and stated that DHCC could make a large impact by facilitating these efforts.

Dr. Fan asked the members to submit recommendations for individuals to be on the subcommittee. Dr. Fan agreed to accept the recommendations via email, and stated that they can also be sent to Ayanna Harrison (ayanna.harrison@delaware.gov). She reminded the members that the timeline is short, and work will have to begin soon in order to utilize the available funding. Nick Moriello added that there has been some outreach done to institutions of education to attempt to assess if there are any immediate workforce needs that could possibly be funded by COVID relief funds. Melissa Jones expressed interest in participating in this initiative.

Public Comment:

Lolita Lopez (via the Webex comment box) thanked Mr. Heffron for bringing up the workforce needs in Community Health. She commented that there is not only a need for a steady stream of primary care providers and support staff but also an emerging need for a team of Community Health Workers out in the community that are trained to connect people with care. Mr. Heffron stated that Community Health Workers can provide a direct link to general public and more importantly the state's vulnerable populations with health care services. Ms. Lopez also shared that she assisted with preparing a proposal to submit to NCC. The proposal included plans to create a Community Health Care workforce, but the funds were no longer available. She added that the proposal did not meet the CARES ACT requirements because it was for long-term funding. Dr. Heffron and Ms. Lopez agreed to meet to continue the discussion.

Joann Haase (via the Webex comment box) urged the commissioners to remember the patient/consumer when evaluating the usefulness of telehealth. She added that they are important "stakeholders". She also shared that her family has used telehealth services several times in the past months. It has been helpful since they have limited trips outside of the house.

Strategic Retreat

Dr. Fan asked if the commissioners were in agreement with holding the 2020 DHCC Strategic Retreat in November of 2020. All commissioners agreed. Dr. Fan charged them with bringing agenda items to the October meeting. Suggestions can also be sent to her or Ayanna Harrison via email. Dr. Fan announced that the retreat would be a half-day event, held in the afternoon on November 20, 2020. At this time, it is not known whether the event will be in-person or virtual. Logistical planning will be depending heavily on the climate and circumstances related to the pandemic. Dr. Fan opened the meeting for public comment.

Public Comment:

Dr. Devona Williams representing the Mid-Atlantic Association of Community Health Centers (MACHC) offered a collaboration suggestion. The MACHC Centers oversees health centers in Maryland and Delaware. She suggested the DHCC consider working with Delaware's community health centers (Westside Family Healthcare, Henrietta Johnson Medical Center, and La Red Health Center) as partners for the workforce initiatives of the DHCC. She also mentioned that HRSA recently began a new focus on workforce and the centers are focusing efforts in that direction. These centers are on the ground and working with vulnerable populations. She suggested these centers be included in the strategic planning. She offered to facilitate the connections with the CEOs if needed.

Fiscal Year 2022 Budget

Secretary Rick Geisenberger provided the commissioners with a brief overview of the process the State of Delaware has undergone to project the budget for fiscal year 2022 (FY22). His presentation began with a review the budget cycle. The fiscal year begins in July and agencies submit their proposed budgets in October. After public hearings are completed the Governor presents the budget to the General Assembly. The Joint Finance Committee convenes to consider recommended budget and they produce a budget bill for the General Assembly's consideration. The budget is adopted at the end of June. He mentioned that work on the next budget begins once the fiscal year budget is passed.

Secretary Geisenberger pointed out that due to a new law, DEFAC now meets five times a year instead of six times. The change includes moving the October meeting to September and discontinuing the April meeting. He added emergency meetings can be held during financial crises.

His presentation continued with an overview of FY22 budget. He reported that since March 1st, \$530 million was been taken out of the FY20 and FY21 forecast. This had a huge impact on the Governor's recommended budget. It also impacted the state's spending between March and June. Secretary Geisenberger reported that in FY20 the state was down 100 million dollars. He also shared that the pre-COVID forecast showed available resources for additional programs. Looking forward to FY21 and FY22 the available resources to fund new programs if very slim. He shared that typical annual door openers (Medicate, the school enrollment growth, Pension plan and debt services, and Required personnel costs). As of right now he does not suspect there will be additional resources in the budget, however several DEFAC meetings are scheduled to take place so this could change.

Secretary Geisenberger spent some time discussing the CARES ACT funding. He shared that this funding is not available for the general budget. The funding is only for activities directly related to COVID. The funding expires on December 30th. Unspent funds will be returned to the Federal Government. Some of these funds will be used to support the state unemployment insurance. He also shared details about the HEALS ACT. This is a Democratic House plan that would provide states with additional funding and extend the funding for two years. The Republican Senate bill does not provide additional funding but allows for greater flexibility to cover non-COVID related expenditures and would expire September 2021. This funding may be available to support door openers. He concluded by stating that agencies should expect zero growth budget.

Insurance Commissioner Navarro asked Secretary Geisenberger if a new Federal administration could change the Federal stimulus funds. He also asked if a new law would be necessary? Sec. Geisenberger stated that the law is codified. He added that the U.S. Treasury developed guidance very close to what congress proposed and while it is possible, it is unlikely to be dramatically changed with a new administration.

Secretary Magarik highlighted the importance of doing some planning and imagining in case there is a second round of funding. She suggested the commissioners use the retreat or future meetings to discuss possibilities for short-term COVID response activities and long-term initiatives like strengthening telehealth and implementing better data integration with the DHIN. She also stated that there is a likely to be a

second round of stimulus funding especially if pandemic lasts longer. Secretary Geisenberger agreed and added that the presidential cycle may cause some delays.

Dr. Fan read a comment from the chat box from Dr. Dave Muhuri, *“How much funding the state is expecting to have left over at the end of December from the CARES ACT?”* Sec. Geisenberger responded that the largest use of the CARES ACTS funds went to insurance benefits. The state has paid a sizable amount of state unemployment insurance benefits. Under the ACT, the state is allowed to restore the state unemployment trust fund back to the pre-COVID total. He estimates that this will use of up to \$300 million, depending on the rate of unemployment between now and the end of the year. The state spent over \$100 million to purchase PPE and testing supplies. There are plans to spend an equal amount before the end of the year. He mentioned the new \$100 million program for small business. The largest variable is the rate of the unemployment insurance. Lastly, he added that the funds have not been withdrawn yet because the state waiting. They could possibly take advantage of the available interest free loan from the Federal Government. The state plans to use the funds before the expiration date.

Dr. Fan called for additional public comments, hearing none she transitioned to the next agenda item. The full presentation can be found on the DHCC website:

https://dhss.delaware.gov/dhss/dhcc/files/fy2022dhccbudget_090320.pdf

POLICY DEVELOPMENT

DHSS Strategic Plan

The recently appointed Cabinet Secretary of Health and Social Services (DHSS), Molly Magarik presented the Department’s Strategic Plan. Secretary Magarik’s presentation began by sharing the names of the 12 divisions within DHSS. She reported that plan was developed over a 14-month period. The plan addresses four key areas: DHSS staffing and workforce management, Data integration and sharing across DHSS divisions, Gaps in services provided by DHSS and Person-centered service delivery. The goals were developed after a thorough review of existing literature and an inventory of current DHSS programs. They also conducted a stakeholder’s needs assessments that included several focus groups and surveys. Input was accepted from experts in the areas of health care, business and policy.

DHSS focused on three guiding principles throughout the development process. The first was the commitment to creating fundamental and systemic changes to improve the infrastructure of the department and delivery of services. The second was the vision of the department which is to ensure Delawareans receive quality services. The third was to promote health and well-being, foster self-sufficiency, and protect vulnerable populations.

There are six strategic plan goals: to develop a person-centered approach; improve the infrastructure of the department, to build, align and strengthen the department’s workforce; to enhance and integrate data; promote inclusive communication among DHSS leadership, staff and stakeholders; and to strengthen the department-wide planning structure.

Secretary Magarik concluded her presentation by encouraging attendees view the full plan by visiting the DHSS website and view the full plan (https://dhss.delaware.gov/dhss/dhcc/files/hccstratplanmagarik_090320.pdf). She

added that the public comment period has begun and will run through the end of September 2020. Comments are being accepted via email at DHSS_TownHall@delaware.gov and to ensure all feedback has been received comments will continue to be accepted after the planned deadline. She thanked the commissioners and the public attendees for their feedback.

Secretary Magarik's presentation can be found on the DHCC website:
https://dhss.delaware.gov/dhss/dhcc/files/hccstratplanmagarik_090320.pdf

Dr. Fan commended Secretary Magarik on her efforts. Secretary Geisenberger stated that the pandemic has been horrible, but he is optimistic because he sees what is possible when leveraging energy and technology. He has been very impressed with how state agencies have worked together and adapted to changes to meet the needs of Delawareans. Dr. Fan agreed, adding that the pandemic has been a wakeup call any many lessons have been learned. Insurance Commissioner Trinidad Navarro shared that he is optimistic with what can be done in the future, particularly with telehealth. He pointed to the success of telehealth/medicine during this time and shared that many Delaware residents were able to receive care with the it's widespread implementation. Parents who were unable to leave home because they were taking care of children were able to continue their visits. He reported that the changes in Delaware's Insurance Code (Title 18) mandates coverage of audio and visual telehealth. The new law not only requires health plans to cover telehealth and telemedicine services, but it also requires plans to cover at the same rate as in-person visits.

UPDATES

Primary Care Reform Collaborative (PCRC)

Dr. Fan provided a brief Primary Care Reform Collaborative update. There were no meetings in August and the next meeting is scheduled for September 21. She mentioned that the Technical Committee continued working with the Office of Value Based Health Care Delivery. Dr. Fan called on Leslie Ledogar (DOI) to offer her insight on the progress of OVBHCD work. Ms. Ledogar mentioned that there were two productive sessions. She reports they are working with providers on questionnaires and collaborating with DHIN. She also reports they have conducting outreach activities with members of the health care delivery space, regarding efforts to improve primary care delivery and establish alternative payment methods. She expressed her excitement with direction of the collaboration and added that the experience has been fulfilling and eye opening. She thanked participants for their time and insights.

Pandemic Resurgence Advisory Committee

Dr. Fan shared that the Pandemic Resurgence Advisory Committee (PRAC) started in June 2020. The committee has three separate subcommittees: Equity, Health and Business. She reported that the interim report was released in July and the committee is currently accepting public comment. The PRAC committee will spend several meetings responding to public comments and compiling any common themes. The deadline for public comment is September 11, 2020 and the final report will be released on September 30th. Dr. Fan continued to share that as chair of the Health subcommittee she has noted several themes. Some of the top themes from the public comments have been mask wearing guidelines, enforcement of non-compliance, testing, and data transparency concerns. She also mentioned that the

committee has received several comments regarding business non-compliance with pandemic guidelines and business readiness to open under the guidelines. The committee has also been heavily involved with providing guidance to state educators and administration regarding school reopening's and adapting accompanying messaging and communication with the public. She thanked those who provided comments and encouraged all attendees to visit the website (<https://governor.delaware.gov/prac/>) to add feedback and final comments.

Health Resources Board Sunset Update

Next, Dr. Fan provided an update about the Health Resources Board (HRB) Sunset review process. The Sunset Committee (JLOSC) analysts are completing the recommendation phase. They are creating two separate anonymous surveys; one for the HRB board members and the other for stakeholders. Board members will receive their survey directly from the Sunset Committee staff. Sunset staff will notify interested stakeholders of the survey's availability via a newly established sunset mailing list. DHCC will be notified when the link to the stakeholder survey is available on Sunset's website. In late November/early December, Sunset analysts will complete the recommendation report and DHCC staff will receive a copy. The non-public report can be shared with the commissioners, HRB board members, and the DHSS Secretary's office for comment. In December, DHCC will submit formal comments by the end of the month. The formal comments will be published in the final report given to the committee. In January, the Sunset Committee plans to meet during the General Assembly, barring COVID gathering mandates. Lastly, in February, a recommendation meeting will be held with DHCC. At the conclusion of the meeting, the final report will be made available for the public on the Sunset website.

State Loan Repayment Program

Dr. Fan gave a brief update about the State Loan Repayment program. She shared details about the review and approval process. She reported that applications are continuously accepted throughout the year. When applications are received, they undergo review by the DHCC staff. Awards are issued twice a year; March and September. The application deadline for the upcoming award cycle is September 15, 2020. A special exception has been made due to the COVID pandemic and applications received after the 15th will be reviewed in December. DHCC added the extra review date to accommodate the providers that may have missed the application submission deadline. Applications are available on the SLRP website: <https://dhss.delaware.gov/dhcc/slrp.html>. Submission should be sent to DHCC at 410 Federal Street, Dover, DE 19901 or fax (302) 739 – 6927. Inquiries should be directed to Eschalla Clarke at DHCC@Delaware.Gov or (302) 739 – 2730. Dr. Fan invited Ms. Clarke to address the meeting attendees. Ms. Clarke reiterated Dr. Fan's comments and encouraged attendees to advertise the program and application deadline.

DIMER

Dr. Fan called on DIMER board member, Dr. Jan Lee, to share DIMER updates with the Commissioners. Dr. Lee stated that much of the work has been conducted virtually. In May, a New Castle County engagement event was held. The panel discussed the DIMER program. Focusing on the admissions advantages for Delaware residents applying to DIMER education partner schools SKMC and PCOM. They provided attendees with recommendations for undergraduate studies and shared highlights of the journey

from medical school to practicing physician. Dr. Lee reported that 25% of the attendees had no prior knowledge of DIMER, 25% were not planning to apply to DIMER partner schools prior to event and 75% intend to apply to DIMER partner schools after attending the event and learning about the program.

Dr. Lee continued to share updates by announcing an upcoming event to be held in Kent County. The event will be virtual, and it is scheduled for Thursday, October 8th. A similar Sussex County outreach event will be scheduled in late November/Early December. She concluded her comments by sharing that letters are being sent to DIMER students and an alternative to the DIMER dinner is being considered. The next DIMER board meeting is scheduled for the end of September. Dr. Fan thanked Dr. Lee for the updates and transitioned the next agenda item.

Board Positions

Dr. Fan informed the members that there are currently vacancies on all of the DHCC boards (HCC, HRB, DIDER and DIMER). She wanted to bring this to the attention of the members and the public. Some of the positions are Governor appointed. They are working with the Governor's office to fill these positions. The pandemic has placed a lot of these decisions on hold. She asked the members and attendees if they had recommendations. Members should forward recommendations to Dr. Fan.

DHCC Priorities in light of COVID

Dr. Fan addressed the commissioners and asked if there were additional priorities that the DHCC needed to consider in light of COVID. She added that there may be other areas that align with the mission to promote access to high-quality affordable care that require the commission's energy and resources. She asked the members to share from a personal and organizational perspective.

Sec. Geisenberger mentioned the twenty-five modifications to the emergency declaration. He wonders if some of the areas related to health care could be researched by the DHCC to ensure they are made permanent. He continued by highlighting telemedicine as an example. He asked if DHCC could pull data and supporting documentation/arguments to reinforce the anecdotal data received stating the value of this as a method of practice. Dr. Fan agreed that it was a good recommendation. She reported that legislation to extend coverage beyond the emergency order is in place. Coverage will end in June 2021. She added that it may be difficult to remove due to its overwhelming success. She does suspect there will be a desire to implement guardrails in relation to privacy. She agreed that the recommendation to identify the emergency modifications that are related to health care to research ways to promote their codification. Sec. Geisenberger announced that all of the modifications are being consolidated into one document to make it easier for them to be reviewed. He added that the collection of underlying data would be useful. Dr. Fan agreed but pointed out that the analysis of usage and effectiveness of telehealth is very piecemeal. It is difficult for smaller practices to collect this information.

Dr. Lee reports that if the type of visit is captured in the claim DHIN will have it in the Health Claims database and it could be analyzed. She added that their data could not be used to analyze quality.

Nick Moriello agreed and added that Secretary Geisenberger's suggestion he stated that the DHCC enable the work to review the data and serve as guides for legislators. There is a lot that we see about telehealth and speaking as pre from Highmark, he reported here is a lot that they see about telehealth that would

indicate a good case to permanently codify some of the changes. He also pointed out their stakeholders there was some misconceptions about telehealth relative to what they see in the claims data. He suggested that the DHCC commission a study of the available data and form recommendations as a group. Ted Becker also felt the information will help with workforce planning taskforce. Dr. Fan agreed and stated that commissioners should recognize that digital is here to stay and identifying how we could make include this as a part of regular care coordination/team care.

Public Comment:

Dr. Fan addressed a comment in the chat box from Dr. Dave Muhuri:

“Currently, most local hospitals rely on out of state labs to perform COVID19 testing that has a Turn Around Time(TAT) of 7-8 days; ex: Christiana Care uses Vikor from South Carolina for outpatients (in-house testing is limited to manpower/automation) making it difficult to triage patients or perform contact tracing efficiently. Being “in the middle of it all(two major metropolitan areas)” I am interested in bringing these facilities home and creating an in-state solution to reduce TAT to a few hours, improve testing specificity and sensitivity by using genomics, promote local high tech jobs, improve our local hospital’s access to such amenities, and generate a possible extra source of revenue. I am in talks with several such companies that have come together to create highly sophisticated and automated labs implementing shipping containers fitted out with BSL II hoods that is almost fully automated with uni-directional work flow with a TAT(door to result) of 3 hours. + mobile, rapidly deployable, openly sourced, scalable, a switchable/downgradable. Very interested in creating a taskforce involving the state public lab, CLIA, public works(engineers), city planners, and local entrepreneurs if the state has enough funding to implement such a project locally. If the commission is open to it, then I will move forward in getting these folks together to rapidly develop this lab.”

Dr. Fan responded to the question by encouraging the Dr. Muhuri to contact the Department of Public Health (DPH). She stated that testing is closer to a DPH perspective versus health policy. She added that the question seems more operational and includes a lot of detailed. She thanked him for the comment and encouraged him to reach out to DPH. Dr. Fan asked for the comment to be included in the minutes and then opened the discussion up for more comments.

Commissioner Trinidad Navarro announced that there will be another decrease on the Exchange (Insurance Marketplace premiums). This will be for the second year in a row. He expressed optimism of the direction the marketplace is going. He encouraged more who may have lost employer insurance benefits to investigate the Insurance Marketplace because it is more affordable than 2018. He reported a 1% decrease in individual market and a 3% decrease in small group market. He cannot be certain, but he foresees the likelihood of another decrease. He wished there was more coverage about the decrease. When it first started there was a lot of increase due to the very sick utilizing the Marketplace for insurance. He has had conversations with Nick Moriello about how the medical loss ratio will be affected because some have chosen to avoid procedures and treatments.

Nick Moriello expressed similar optimism with the direction of the Marketplace and stabilization of prices. He also noted that those who may have lost their jobs may be able to apply for waivers to enroll in the Marketplace outside of the general enrollment or even qualify for Medicaid. He thanked the Department of Insurance for collaboration related to the Marketplace. He also mentioned the work of DHSS to

implement the 1332 waiver. He added that all of these efforts have made a huge impact. Dr. Fan agreed that seeing the Marketplace successfully mature despite all the variables (past and present) speaks to the power of our ability to get the work done and to do it successfully.

Sec. Geisenberger asked for clarification on rate reductions and Insurance Commissioners comment about the rates being based on last year's claims. He asked if the rate reduction reflects what has taken place during the first six months of 2020, adding that this may be good news for next year. Insurance Commissioner Navarro agreed and stated that he is cautiously optimistic that once we have a vaccine and other therapeutic treatment measures, they may see a big increase in the procedures people have been placing on hold. He also added that Highmark has been profitable and other insurers are taking note of their success. He believes there is a good chance that other insurers will come to Delaware, allowing for healthy competition and providing more options for Delawareans.

Nick Moriello asked if he could add a point of clarification regarding Sec. Geisenberger question. He stated that there are several variables that go into rate filings. When filing future rates for 2021, for small employer and individuals, claims experience, current retrospectively, as well as predictor of future trends and claims are taken into account. He added that there was quite a bit of reductions in claims volume this year. This will impact the medical loss ratios. This month Highmark is sending rebates to consumers and small businesses based on a rolling retrospective three-year average of their loss ratios. Dr. Fan thanked Mr. Moriello for his explanation and asked if there were any additional comments.

Sec. Molly Magarik expressed her appreciation for the work completed by the Insurance Commissioner. She also thanked Highmark for their participation in the Marketplace. She wanted to clarify Delaware has not reopened the Marketplace outside of the traditional enrollment dates. Delaware's Marketplace is still run by the Federal government. Holding a special enrollment event was a not a flexibility that was extended to Delaware. Other states that have offered special enrollments, have been able to do so because they are state based programs. Sec. Magarik pointed out that anyone who has lost their job or coverage will qualify under the special event exception. Delaware was not able to hold a pandemic special enrollment period but there is still opportunity for those in need to obtain coverage. Dr. Fan thanked Sec. Magarik.

Insurance Commissioner Navarro thanked Sec. Magarik for her comments and added that it was in fact DHSS that ensured the waiver was implemented in Delaware. He applauded the efforts of Sec. Magarik and Dr. Walker. He admitted to initially being worried about including the program. He stated that he was grateful that DHSS brought in a consultant to assist with the efforts. He believes the waiver has made a very positive impact.

ADJOURN

Dr. Fan encouraged attendees to check the [State of Delaware Public Calendar](#) for the DHCC meeting location and updates. The next meeting is scheduled for October 1st and is likely to be virtual.

Dr. Fan called for any last public comments. Hearing no other business or public comment, she adjourned the meeting at approximately 10:55 a.m.

Next Meeting

The next DHCC meeting will be held on October 1, 2020 from 9 a.m. – 11 a.m.

Public Meeting Attendees 09/03/2020

Randy Munson	United Medicaid LLC
Brian Olson	La Red Health Care
Mary Fenimore	Medical Society of Delaware
Mary Perkins	MACHC Goeins-Williams Associates
Bill Howard	BDC – Health
John Dodd	BDC – Health
Anthony Onugu	UMACO
Lolita Lopez	Westside Family Healthcare
Pamela Gardner	Delaware Health Sciences Alliance
Nina Figueroa	Statewide Benefits Office
Cheryl Heiks	Delaware Health Care Facilities Association
Deborah Hamilton	Hamilton Goodman Partners
James Grant	The Department of Health and Social Services
Dwaipayan (Dave) Muhuri	University of Delaware
Steven Costantino	The Department of Health and Social Services
Wayne Smith	Delaware Healthcare Association
Leslie Ledogar	Delaware Department of Insurance
Devona Williams	MACHC /Goeins-Williams Associates
Nicholas Conte	Division of Public Health, Oral Health
Kathy Collison	Division of Public Health
Lincoln Willis	Medical Society of Delaware
Jill Fredel	The Department of Health and Social Services
Joanne Haase	League of Women Voters of Delaware
Michelle Stant	The Department of Health and Social Services
Vinayak Sinha	Freedman HealthCare
Lori Ann Rhodes	Medical Society of Delaware
Elizabeth Lewis	Hamilton and Goodman Partners, LLC
Ruth Lytle-Barnaby	Planned Parenthood of Delaware
Maggie Norris Bent	Westside Family Healthcare
Christina Crooks Bryan	Delaware Healthcare Association
Lynn Robinson	Medical Society of Delaware
Megan Williams	DEHA
David Roose	DOF
Jennifer Reid	
C. Ballard	
Yvette Santiago	
Paula Roy	
P. Cooke	
Mary Kate McLaughlin	